



Year 4 Formative OSCE 2021

Reading for Station 4

You are an intern in the emergency department at Logan Hospital.

Elijah Fernsby is a 15-year-old boy who was brought into the ED by ambulance from a school camp with abdominal pain and vomiting.

His vital signs are as follows:

- Heart rate 120 beats per minute
- Blood pressure 95/56 mmHg
- Respiratory rate 30 breaths per minute
- Oxygen saturation 99% on room air
- Temperature 36.7°C

A venous blood gas confirms a diagnosis of diabetic ketoacidosis, likely secondary to undiagnosed type 1 diabetes. Appropriate management has been commenced by the registrar and the paediatric team has been contacted. The prognosis is good.

Elijah's father, Basil, has now arrived at the hospital. You have been asked to speak with him. The triage nurse informs you that he seems quite frustrated and concerned.

Assessment Tasks

In a total of **eight (8)** minutes:

- Speak with Basil and explain what has happened, the diagnosis and immediate and long-term management plan.
- Answer Basil's questions and address his concerns.

You should imagine that you are alone in the room with Basil. You do not need to interact with the examiner.

The examiner will give you a prompt when there are two (2) minutes remaining.

Simulated Patient Information

Thank you for supporting this GUMS formative OSCE. Your contribution is greatly appreciated!

Each candidate will be with you for eight (8) minutes with a 2-minute break in between.

The candidate has the following scenario and task:

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Instructions for simulated patientDemeanour

You are Basil, the father of Elijah Fernsby, a 15-year-old boy who was brought into hospital by ambulance from a school camp. You are very distressed and frustrated and are not sure what has happened. You haven't yet seen Elijah.

Be standing at the start. The candidate should invite you to sit down. You should go to sit in the chair closest to the door. The candidate should position themselves in the chair closest to the door.

You should become agitated throughout the scenario. The candidate should try to verbally deescalate the situation. After being deescalated, you may become agitated again throughout as appropriate.

Background

Ask questions around any terms you do not understand/medical jargon. You have medium to low health literacy.

If asked, your wife has diabetes and is on insulin, otherwise you do not know much about it or what it involves. You thought it was something "fat people who eat too much sugar" get.

If asked about his history, Elijah is otherwise fit and well. He has no pre-existing medical conditions (that you're aware of), has never had surgery, does not have any allergies and his childhood immunisations are up to date. He is currently in year 9 and doing well at school otherwise and has many friends.

Questions

Initially ask the candidate:

- "Doctor, what has happened? Is my son going to be okay?"

Continue to ask questions as appropriate. These may include:

- Will he survive?
- What is the diagnosis?
- What treatment are you giving him here in hospital?
- Does he need to stay in hospital?
- What management will he require long-term?

Later in the conversation say:

- *"I'm fed up with the school. My wife/husband and I are going to sue them. Force him to go away on school camp and then let him get sick. Can you give me a statement for our lawyer?"*

Examiner Instructions

Please verify that you are examining the correct student by checking the name on the student's ID card, as the student enters the room. Please write the student's name at the top of the marking scheme.

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Interaction with the candidate

- You are an observer examiner. Please do not speak to the candidate, after you have checked their ID. Please do not provide prompts on the station content
- Stay out of the line of sight between the candidate and the patient. Do not provide any positive or negative feedback to the candidate

Time prompt

- Please start your timer as the candidate enters the room
- At six (6) minutes, please interrupt the candidate with a time prompt, saying

“You have two (2) minutes remaining”

- The candidate has only eight (8) minutes to complete the station. When the 8-minute bell/buzzer rings, they should be asked to finish and leave immediately
- If a candidate finishes early, please ask them to remain in the room, and do not converse with them. They are able to continue the assessment task up until the eight (8) minute buzzer/bell

Completion of marking scheme

- Please record your observations on the marking scheme as you make them
- Please mark **as you go**, and hand the marking scheme to the candidate as they exit the station
- Please add narrative feedback to the marking scheme, especially if the candidate did not perform well. These comments will assist the candidate’s learning

‘Reset’ the examination environment

- After each candidate leaves, please discard any notes the candidate may have made and ‘re-set’ the station to ensure that it is the same for each candidate

ID Check
(Please tick)

OSCE Score Sheet

Station 4 – Paediatric DKA Counselling

Student Name/Number.....

Examiners Name:

SP:

.....

No.	Assessment Item (details)	Mark
1	Introduction and Hygiene <input type="checkbox"/> Appropriate introduction <input type="checkbox"/> Hand hygiene before <input type="checkbox"/> Hand hygiene after	___/3
2	Informs of diagnosis <input type="checkbox"/> Provides initial reassurance about condition and progress <input type="checkbox"/> Advises of diagnosis of diabetic ketoacidosis <input type="checkbox"/> Advises of diagnosis of type 1 diabetes	___/3
3	Diabetes and DKA counselling (max 6 marks) <input type="checkbox"/> Assess parental level of understanding about diabetes <input type="checkbox"/> Ask if child has diabetes and anyone in family <input type="checkbox"/> Explains basic physiology of diabetes <input type="checkbox"/> Explains common symptoms of diabetes <input type="checkbox"/> Explains basic physiology of DKA (high glucose, acidic) <input type="checkbox"/> Explains common causes of DKA (infection, new onset diabetes) <input type="checkbox"/> Explains common symptoms of DKA <input type="checkbox"/> Discuss prognosis	___/6
4	Explains management of DKA (max 5 marks) <input type="checkbox"/> IV fluid resuscitation <input type="checkbox"/> Insulin <input type="checkbox"/> Potassium <input type="checkbox"/> Repeat blood tests <input type="checkbox"/> Close monitoring <input type="checkbox"/> Paediatric/paediatric ICU admission	___/5
5	Explains long-term management of diabetes (max 4 marks) <input type="checkbox"/> Insulin (injections) <input type="checkbox"/> Monitoring of blood glucose (finger prick, implanted monitors) <input type="checkbox"/> Review with paediatrician or endocrinologist <input type="checkbox"/> Allied health: diabetes educator, dietician <input type="checkbox"/> GP follow-up long-term – importance of sugar control	___/4
6	Patient Questions <input type="checkbox"/> Asks patient if they have questions <input type="checkbox"/> Overall, answers patient questions appropriately (3=excellent, 2=good, 1=poor)	___/4
7	Communication Skills <input type="checkbox"/> Invite patient to sit <input type="checkbox"/> Safety - positions self in chair closest to door <input type="checkbox"/> Appropriately verbally deescalates <input type="checkbox"/> Offers to provide written information	___/4
8	Communication Skills continued <input type="checkbox"/> Overall explanations are made using terminology appropriate for the patient’s level of health literacy (3=excellent, 2=good, 1=poor)	___/3
9	CLARITY (Confidence, organisation, structure)	

	1= very disorganised, very unstructured, lacking in confidence 2 = expected level 3= outstanding	___/3
10	WARMTH (Engagement, compassion, care for patient) 1= Cold, uncaring, brusque 2 = expected level 3 = outstanding	___/3
	Total	/38